Exploring Sexual and Behavioral Determinants of Sexually Transmitted Infections in HIV-positive Migrants

Christs Thomas*

Department of Internal Medicine, University General Hospital Attikon, 12462 Athens, Greece

Introduction

The interplay between sexually transmitted infections and HIV remains a critical area of global public health concern. For individuals living with HIV, STIs not only exacerbate health complications but also enhance the risk of transmitting HIV. Among migrant populations, these risks are further amplified by unique social, economic, and behavioral factors that influence vulnerability to STIs. Migrants often face challenges such as limited access to healthcare, cultural and linguistic barriers, stigma, and socioeconomic disadvantages, all of which contribute to higher STI prevalence. Understanding the sexual and behavioral factors that increase STI risks among HIV-positive migrants is essential for creating targeted interventions that address the specific needs of this population. This article examines these determinants, explores their implications, and suggests pathways for more inclusive healthcare strategies. Sexually transmitted infections (STIs) are a global public health concern, and their relationship with HIV is well-documented. In the context of HIV-positive individuals, the presence of other STIs can exacerbate disease progression, increase HIV transmission rates, and complicate the management of both conditions. Migrants, especially those moving from regions with high rates of HIV and STIs, face unique challenges when it comes to sexual health. This article will explore the sexual and behavioral determinants that influence the prevalence and transmission of STIs among HIV-positive migrants [1,2].

Description

Migration can be understood as both a social and a health determinant. Migrants are often exposed to different sexual health risks compared to the populations in their country of origin or destination. The migration process itself can create vulnerabilities due to changes in sexual networks, lack of access to healthcare, and psychological stress, all of which can influence sexual behavior. When an individual is already HIV-positive, these vulnerabilities are compounded, as the presence of HIV can alter immune function, making them more susceptible to other infections and complicating treatment strategies. The relationship between HIV and STIs is multifaceted. Having an untreated STI can increase the risk of acquiring or transmitting HIV due to the inflammatory responses and mucosal lesions that facilitate HIV entry. Inversely, the presence of HIV can increase the susceptibility to acquiring other STIs, as immune suppression reduces the body's ability to fend off infections. For HIV-positive migrants, this cycle of vulnerability can be more pronounced due to socio-economic, cultural, and psychological factors. The intersection of migration, sexual health behaviors, and HIV infection leads to a complex public health issue requiring nuanced strategies. In many countries, healthcare systems do not always offer affordable or culturally appropriate

*Address for Correspondence: Christs Thomas, Department of Internal Medicine, University General Hospital Attikon, 12462 Athens, Greece, E-mail: thomas. christs@gmail.com

Copyright: © 2024 Thomas C. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Received: 03 October, 2024, Manuscript No. jar-24-154548; **Editor Assigned:** 05 October, 2024, PreQC No. P-154548; **Reviewed:** 17 October, 2024, QC No. Q-154548; **Revised:** 22 October, 2024, Manuscript No. R-154548; **Published:** 29 October, 2024, DOI: 10.37421/2155-6113.2024.15.1026

services, and migrants may have limited awareness of available services. Even when healthcare is accessible, there may be language barriers, fear of legal repercussions, or a lack of understanding of local healthcare systems. For HIV-positive migrants, these barriers may be compounded by the need for specialized care [3-5].

Conclusion

The prevalence of STIs in HIV-positive migrants is shaped by a complex interplay of sexual and behavioral determinants. Factors such as high-risk sexual practices, inconsistent condom use, the influence of sexual networks, and social determinants like stigma, access to healthcare, and mental health stress contribute to heightened vulnerability. Addressing these issues requires multifaceted public health strategies, including targeted sexual health education, improving access to healthcare, reducing stigma, and fostering an environment where migrants feel empowered to protect their sexual health. Efforts to reduce STI transmission in HIV-positive migrant populations must consider not only the biomedical aspects of HIV and STI prevention but also the broader social, economic, and psychological factors that influence sexual health behaviors. By addressing these determinants in a culturally sensitive and accessible way, we can improve the sexual health outcomes for HIV-positive migrants and reduce the transmission of both HIV and other STIs within this vulnerable population.

Acknowledgement

None.

Conflict of Interest

None.

References

- Blossom, D. B., R. H. Beigi, J. J. Farrell and W. Mackay, et al. "Human papillomavirus genotypes associated with cervical cytologic abnormalities and HIV infection in Ugandan women." J Med Virol 79 (2007): 758-765.
- Rowhani-Rahbar, Ali, Stephen E. Hawes, Papa Salif Sow and Papa Toure, et al. "The impact of HIV status and type on the clearance of human papillomavirus infection among Senegalese women." J Infect Dis 196 (2007): 887-894.
- Firnhaber, Cynthia, Hoa Van Le, Audrey Pettifor and Doreen Schulze, et al. "Association between cervical dysplasia and human papillomavirus in HIV seropositive women from Johannesburg South Africa." *Cancer Causes and Control* 21 (2010): 433-443.
- Zur Hausen, Harald. "Papillomaviruses and cancer: From basic studies to clinical application." Nat Rev Cancer 2 (2002): 342-350.
- Otter, S. J., Jayanta Chatterjee, A. J. Stewart and Agnieszka Michael. "The role of biomarkers for the prediction of response to checkpoint immunotherapy and the rationale for the use of checkpoint immunotherapy in cervical cancer." *Med Oncol* 31 (2019): 834-843.

How to cite this article: Thomas, Christs. "Exploring Sexual and Behavioral Determinants of Sexually Transmitted Infections in HIV-positive Migrants." *AIDS Clin Res* 15 (2024): 1026.